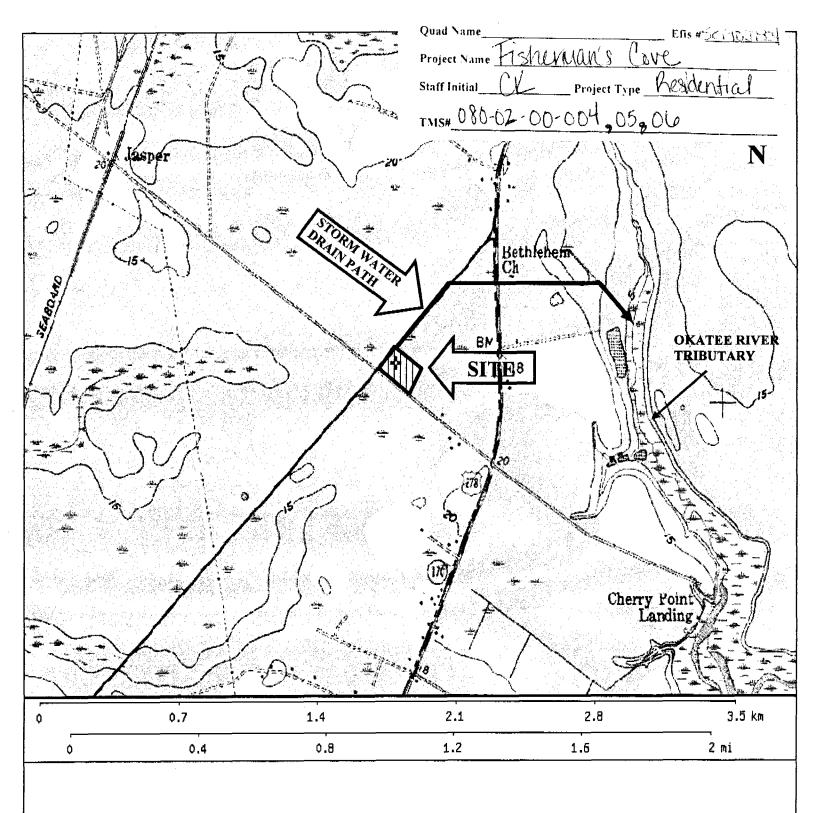
63103 ce of Intent (NOI) for Stormwater Discharges from clarge and Small Construction Activities. NPDES General Permit SCR100000 For official use only File number: 31-08-04-04 Permit number: SCR101285 Submittal package complete: Public Notice Start Date (OCRM only): Submission of an NOI constitutes notice that the entity identified in Section Lintends to be authorized under SCR100000. Instructions on page 5. Date: 03/10/2008 Project/ Site Name: Fisherman's Cove - 1243 County: Jasper Do you want this project to be considered for the Expedited Review Program (ERP)?

Yes No (See instructions.) If yes, is the design of this project above regulatory requirements or Low Impact Development? ☐Yes ☒No 1. Project Information Project Owner/ Operator (Company or person): CAM Real Estate Company EIN: _____-Phone: 631-807-7693 Mailing Address: 595 Route 25A, Suite 1 City: Miller Place State: NY Zip: 11764 Permit Contact (if owner is company): Mr. Rich Kolsch Phone: <u>631-807-7693</u> Mailing Address: 595 Route 25A, Suite 1 City: Miller Place State: NY Email address (optional): richkolsch@yahoo.com II. Property Information A. Site Location (street address, nearest intersection, etc.): Between Hwy 141 and Short Cut Road City/Town (if in limits): Hardeeville Latitude: 32 ° 20' 6" N Longitude: -80 ° 56' Tax map # (list all): 080-02-00-004, 080-02-00-005, 080-02-00-006 B. Property Owner: CAM Real Estate Phone: <u>631-807-7693</u> Mailing Address: 595 Route 25A, Suite 1 City: Miller Place State: NY Zip: 11764 III. Site Information A. Disturbed area (to the nearest tenth of an acre): 13.4 acres Total area: 13.4 acres B. Is this project part of a Larger Common Plan for Development or Sale (LCP)? ☐ Yes ☒ No LCP/ Overall Development Name: Check here if this is the first phase. Previous state permit/ file number: Previous NPDES coverage number: SCR10 C. Start Date (MM/DD/YYYY): 04/01/2008 Completion Date: 10/01/2008 D. Is this site located on Indian Lands? ☐ Yes ☑ No. If yes, name of reservation. E. Type of Activity (check one): □ Industrial □ Commercial ☐ Institutional Residential: Single-family ☐ Multi-use (Commercial & Residential) □ Other: □ Linear ■ Residential: Multi-family ☐ Site Preparation (No new impervious) F. Are there any flooding problems downstream of or adjacent to this site? ☐Yes ☒No G. Has S.C. DHEC issued a Notice to Comply or Notice of Violation for this site or LCP? □Yes ☒No H. Is any part of the property located inside an MS4 or urbanized area?□Yes ■No If yes, list the MS4 operator or urbanized area name. List all state and federal environmental permits or approvals applied for or obtained for this site (e.g., RCRA). IV. Waterbody Information A. Nearest receiving waterbody(s)[RWB]: Okatee River Tributary Distance to nearest RWB (feet): 3,411 Next/Nearest named RWB: Atlantic Ocean Classification of nearest RWB: ORW B. 1. Waters of the U.S./ State On the site? Delineated/ Impacts? Amount of impacts Identified? □Yes KNO
□Yes NO
□Yes KNO a. Jurisdictional wetlands ☐Yes ☐ No ☐ Yes 📈 Yo b. Non-jurisdictional wetlands XXYes 🗆 No XX Yes ∐ No 83Ac c. Other Water(s) List: ☐ Yes ☐ No ☐ Yes ☐No Feet 2. If yes for impacts in B.1, describe each impact and activity, and list all permits (e.g., USACOE Nationwide permit, DHEC General Permit) and certifications that have been applied for or obtained for each impact.

C. Impaired Waterbodies (See instructions.)		
List the nearest DHEC water quality monitoring	nd station(s) [WQMS(s)] to which construction	stormwater (SW) discharges
 Is this WQMS(s) listed on the most currer 	y(s).18-17 Waterbody(s):Okate t 303(d) List for Impaired Waters? ☐ Yes ☑	40
 a. If yes for 1, list the impairment(s). 		
 b. If yes for 1, will the site's construction 	\$W discharges contain any pollutant(s) cau	sing the impairment(s)?
□Yes □No		
 c. If yes for b, list the impairment(s) affer 	ected by the pollutant(s) referenced in b. $_$	
d. If yes for b, will use of the proposed	BMPs ensure that the site's discharges will no	t contribute to or cause
further water quality standard violat	ions for the impairment(s) listed in c? □Yes	□No
2. Has a TMDL(s) been developed for this	VVQMS(s)? □Yes ⊠No	
 a. If yes for 2, list the impairment(s). 		
b. It yes for 2, has the standard been o	ttained for all impairment(s)? ☐Yes ☐No	
c. If no for b, will the site's construction	\$W discharges contain any pollutant(s) cau	sing the impairment(s)?
□Yes □No		1 E 11 T. / D. / . \ 2
u. 11 yes for c, are your discharges con. □Yes □No	stent with the assumptions and requiremen	is of the IMDL(s)?
D. 1. Are S.C. Navigable Waters (SCNW) on the	rito2 FTVos FTNio	
a. If yes for 1, list the name of the SCN	No contract the contract that the contract t	
b. If yes for 1 will any construction act	vities cross over or occur in, under, or throug	b the SCNIWS TIVES THE
c. If yes for b, then describe activities.	Times cross over or occor in, origer, or mroug	In line 201444 Piles Pildo
d If yes for b, are the activities in SCNN	v covered under a DHEC General Permit or	other DHEC permit?
Yes No	Covered brider a brile General Fairmi of	biller Drice permit
e. If no for d, has an SCNW permit bee	annlied for or issued for the site?	
Yes, for all activities Yes, for so	me activities ITNo	
f. If yes for d or e, list permit number(s)	and corresponding activities	
, 93 (3) a 3/ (3) politili (10//150//3)	and concepting dentines.	
V. Operator Information		
A. SWPPP Preparer: David R. Karlyk, P.E.	2.0	Posistration #1101912161
Company/Firms Constitute Fundaments of	3.C.	Registration #: 1 9 8 2 6
Company/ Firm: Carolina Engineering C		S.C. COA #: 02324
Mailing Address: PO Box 294	City: Beaufort	State: SC Zip: 29901
Phone: (Day) <u>843-322-0553</u>	(Mobile) (Fax)	843-322-0556
Email address (optional): davidk@caroling	engineering.com	
	DDSA] (Company or person): Contact Enginee	
Mailing Address:	City:	State: Zip:
Phone:	City:	_State:Zip:
		_State:Zip:
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USGS QUADRANGLE MAP-JASPER

LONGITUDE: 80° 56′ 02″ LATITUDE: 32° 20′ 06″

FISHERMANS COVE

JASPER COUNTY PROJECT: 1243 CAROLINA ENGINEERING CONSULTANTS, INC. 843-322-0553 843-322-0556 FAX

